

St. James Giving 2022



COMMUNITY
COMMUNION
COMMITMENT

Name(s) _____

Email(s) _____

Address _____

Telephone(s) (home, cell) _____

I would like to support the ministry of St. James Episcopal Church in 2022:

My annual donation will be \$ _____.

My donation will be made: ☐ One time ☐ Weekly ☐ Monthly ☐ Quarterly ☐ Other _____

☐ **Check:** \$ _____ *Make checks payable to "St. James Episcopal Church."*

☐ Please charge my **credit card:** Card number _____ Expiration Date _____
Name as it appears on the card _____

☐ **PayPal** or ☐ **Zelle** (use treasurer@stjamesnewport.org as the payment address)

☐ Square's **Cash App**, using the cashtag \$*StJamesNewport*

☐ **Online banking bill-pay**, using the church's address, below.

☐ **Automatic withdrawal** from my bank account. Please contact me for arrangements.

☐ **Securities or highly-appreciated assets.** Please contact me for arrangements.

☐ Please send me **envelopes** for my weekly contribution

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